



09/628,146

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Applicant or Patentee: Robert Allen Moss ET AL.  
Serial Patent No.: \_\_\_\_\_ Attorney Docket No.: MOSS-1  
Filed or Issued: Concurrently herewith  
For: BALL HITTING PRACTICE APPARATUS

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS  
(37 C.F.R. 1.9(f) AND 1.27(c)) - SMALL BUSINESS CONCERN

I hereby declare that I am:

- ☐ The owner of the small business concern identified below:  
☒ An official of the small business concern empowered to act on behalf of the concern identified below:

NAME OF CONCERN Solid Contact Baseball, Inc.  
ADDRESS OF CONCERN 16 Forest Street, New Canaan, Connecticut 06840

I hereby declare that the above identified small business concern qualifies as a small business concern as defined in 13 C.F.R. 121.3-18, and reproduced in 37 C.F.R. 1.9(d), for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention, entitled BALL HITTING PRACTICE APPARATUS by inventors Robert Allen Moss et al. described in:

- ☒ The specification filed herewith.  
☐ Application No. \_\_\_\_\_, filed \_\_\_\_\_.  
☐ Patent No. \_\_\_\_\_, issued \_\_\_\_\_.

If the rights held by the above identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed below\* and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small business concern under 37 C.F.R. 1.9(d) or by any concern which would not qualify as a

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small business concern under 37 C.F.R. 1.9(d) or a nonprofit organization under 37 C.F.R. 1.9(e). \*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 C.F.R. 1.27)

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 C.F.R. 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING James C. Ackerly

TITLE OF PERSON OTHER THAN OWNER President

ADDRESS OF PERSON SIGNING 364 Rowayton Ave. Rowayton CT 06853

SIGNATURE \_\_\_\_\_

*James C. Ackerly*

DATE \_\_\_\_\_

*26 Jul 2000*

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail Box ISSUE FEE**  
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## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

CLAIMS & SUBMITTAL - VAN BUREN	(Depositor's name)
<i>[Signature]</i>	(Signature)
September 25, 2002	(Date)

APPLICATION NO. 09/627,146	FILING DATE 07/27/2000	FIRST NAMED INVENTOR ROBERT A. MOSS	ATTORNEY DOCKET NO. MOSS-1	CONFIRMATION NO. 1215
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TITLE OF INVENTION: BALL HITTING PRACTICE APPARATUS

OK to Enter

APPLN. TYPE nonprovisional	SMALL ENTITY NO YES	ISSUE FEE \$1380 \$640	PUBLICATION FEE \$0	TOTAL FEE(S) DUE \$1380 \$640	DATE DUE 10/15/2002
EXAMINER CHAMBERS, MICHAEL S	ART UNIT 3711	CLASS-SUBCLASS 473-415000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Fish & Neave

2  
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## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

SOLID CONTACT BASEBALL, INC.

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

New Canaan, Connecticut

Please check the appropriate assignee category or categories (will not be printed on the patent)

☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

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☒ A check in the amount of the fee(s) is enclosed.

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(Authorized Signature) James A. Leiz, Reg. (Date)

*[Signature]* 46,109 Sept 25, 2002

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